

STATUS OF COMPLIANCE WITH LEAD-BASED PAINT REGULATIONS

To be submitted with project set-up, contract, and work-write-up.

Project Name and Address:

1. Check applicable box(es)

- | | |
|--|--|
| <input type="checkbox"/> Lead based paint inspection | <input type="checkbox"/> Risk Assessment |
| <input type="checkbox"/> Presumption of LBP | <input type="checkbox"/> Post 1977 Housing |
| <input type="checkbox"/> Lead Hazard Screening | |

2. If inspection/risk assessment performed:

Name of Inspector/Risk Assessor

Company

3. Were Lead Based Paint Hazards Identified?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

4. If yes, were corrective measures added to the original work-write-up?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

5. Type of Lead-Activity to be conducted:

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Interim controls | <input type="checkbox"/> Abatement |
| <input type="checkbox"/> Standard treatments | <input type="checkbox"/> None |

6. Is relocation necessary?

- | | |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

7. Estimated cost of lead work:

\$

Administrator:

Date:
